

**East Bay Medical Center, P.C.**  
**P.O. Box 19**  
**1401 Short Drive**  
**Prudenville, MI 48651**  
**Phone: 989-366-1515 Fax: 989-366-1501**

**OBAGI BLUE PEEL PATIENT INFORMATION**  
**Information and Informed Consent**

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Depending on the medical condition of you skin, one or more coats of Obagi Blue Peel will be applied. This procedure takes about 20 minutes, depending on the number of coats your cosmetologist or provider had determined necessary. You will experience a mild burning sensation that lasts 2 to 3 minutes. A bluish tint may remain on your skin and will usually wash off in 12 to 24 hours. Your skin will begin to peel within 2 to 3 days and should be healed in an average of 7 to 10 days. Within 10 days, you should be able to resume normal activity.

**After Your Obagi Blue Peel**

Follow your provider's instructions and keep all follow up appointments.

**First 7 to 10 days after the Obagi Blue Peel (or until skin is completely healed)**

Follow this program using the Obagi Nu-Derm System.

- Wash face with Foaming Gel or Gentle Cleanser and tepid water twice a day.
- Apply a mixture of Action (moisturizer) and Tolereen (0.5% hydrocortisone) in equal parts 3 to 4 times a day.
- For itching, use Tolereen as needed.

Should oozing occur, soak gauze pads in a 3% hydrogen peroxide solution and dab the area as needed.

**To Achieve Optimal Results For Healing**

**DO NOT PICK, RUB OR FORCE OFF SKIN.** Avoid the use of extreme facial expressions. Do not over moisturize, keep skin dry. Avoid sun exposure and the use of sunscreens until healing has occurred. Wear protective clothing, a hat and sunglasses. Avoid strenuous exercise and sweating. Do not allow water or shampoo to run onto the treated areas while bathing or showering. Sleep on your back. **DO NOT WEAR MAKE-UP WHILE THE SKIN IS HEALING.** To maintain enhance the results of the Obagi Blue Peel after healing is complete, resume treatment with the Obagi Nu-Derm System. Use Sunscreen daily. We recommend Obagi Physical UV Block SPF 32 or Healthy Skin Protection SPF 35.

**Call the office immediately if you have any unexpected problems after the procedure.**

I understand that the Obagi Blue Peel is not an exact science and the degree of improvement is variable. I understand that occasionally there is no improvement and another form of treatment may be required. By my signature below, I acknowledge that I read the "Obagi Blue Peel Information and Informed Consent" and understand it. I have been given the opportunity to ask questions and my questions have been answered to my satisfaction. I have been adequately informed of the risks and benefits of this treatment and wish to proceed with the Obagi Blue Peel.

Date: \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Cosmetologist or N.P. Signature: \_\_\_\_\_